

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>ST</i>	<i>92</i>	<i>4/3</i>
FORMALITY REVIEW	<i>Rm</i>	<i>155</i>	<i>7/6/01</i>
RESPONSE FORMALITY REVIEW		<i>#81</i>	<i>09-13-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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36/  
9/13/01